

योजना तथा वास्तुकला विद्यालय, विजयवाड़ा School of Planning and Architecture, Vijayawada

	App	lication for Contract Facu	ulty Positions	
		Application No. (For office use o		
To The Director School of Planning Survey No.4/4, ITI Vijayawada, (AP)-	Road,			Affix your recent pass port size photograph
Post applied for	S.No.	Name of the post	Department	
 Name: Father's Name: Date of Birth: (Attach proof) 	Date	(First name) (First name) Month Year		(Surname)
4. Gender: Male/Female/Tr				
5. Address for com with e-mail ID &				
6. Permanent Add with e-mail ID &		lumber		

Married/Un Married/Single	
3. Category	
GEN/SC/ST/OBC(NCL)/EWS	
(attach certificate if, seeking reservation to SC/ST/OBC(NCL)/EWS	5)

10. Educational qualifications: (starting from the Highest qualification up to UG level):

S.No.	Examination Passed (with specialization)	Institute / University	Marks obtained	Division with % (or CGPA)	Year of Passing

All UG/PG/PhD has to be from recognised University. UG & PG qualifications obtained from foreign degrees must be supported with foreign degree equivalence certificate AlU/MHRD. (attach separate sheet, if necessary).

11. Work Experience (starting from present) (attach separate sheet, if necessary with supporting certificates):

	Employer's		Permanent	Scale of	Total	Period of	work	Total	Nature
S.No	Name and Address	Designation	/ Contract	Pay/Basic Pay	Emolum ents	From	То	duration	of Work

							on date.	
Thesis S.No.	(UG / PG Name of	/ Ph.D. complet	ed) Sup		n if any: (a			
S.NO.	Name of	Student		or pletion	litie of	nesi	S	Co-guides (i any)
Addition	onal Admi	nistrative respo		es hand rganizat		ch se		t if necessary

Contere	Conferences & Books) (attach separate sheet, if necessary)								
S.No.	Author (s)	Year	Title	Complete reference of Journal with ISBN/ISSN/DOI					

15. Publication (Papers published in National / International Journals / Peer reviewed and

16. Awards /	Recognitions and Fellowsh	ips	(attach separate sheet, if necessary)	١
10. / ttta. as /	necognitions and renotion	. 23	(accaen separate sneet, ii necessary)	,

S.No.	Award Name	Awarding Organization	Awarded Work / Project
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17.Training programmes	/ workshops ,	/ conference conducted	l, if	any	/ :
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18. Any other additional information, if any:

	•	s should be residents of India ar inted with applicant's character		•	
i)	a) Name	:	ii)	a) Name	:
	b) Position	:		b) Position	:
	c) Address	:		c) Address	:
	d) Email	:		d) Email	:
	e) Phone No	:		e) Phone No	:
	f) Fax	:		f) Fax	:
		APPLICANT'S D	<u>ECLA</u>	<u>RATION</u>	
(a)	•	lare that the information provions that the information provious that the control is the control in the control is the control in the control			
(b)	I shall subm	it myself to the disciplinary jur dinances and the rules that have			•
(c)	_	the decision of the school on all			_
(d)	I understand forbidden.	d that my association active o	r pas	ssive with any	unlawful organizations is
Da	te:	_			Signature of the Applicant

19.References (Any two):

List of Enclosures: 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18.

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